

O.M.B. NO. 3067-0077 Expires July 31, 2002

## FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

## FLOODPROOFING CERTIFICATE FOF NON-RESIDENTIAL STRUCTURES

The floodproofing of non-res floodproofing design certifica community's floodplain man FEMA to allow floodproofed that the design complies with	ation is required. This form agement elevation requin residential basements. T	n ir — be use emer sor affe he p — nitting	d for that certification. Floo ect the insurance rating un of a floodproofed resident	dproofing of a ri less the commu	esidential building nitv has been issu	does not alter a red an exception by certification specifying
BUILDING GWINER'S NAME					POLICY NUMBER	
1116 -h	omb Av	E. S.L		<u> </u>		
STREET ADDRESS (Including Apt., Unit, Suite, and/or Bidg. Number) OR P.O. ROUTE AND BOX NUMBER					COMPANY NAIC NUMBER	
151 Ham						
CITY	•			8	TATÉ	ZIP CODE
	SECTION I FI	OOD INSUF	RANCE RATE MAP (FIRI	d) INFORMATI	ON	
Provide the following from the	e proper FIRM:					
COMMUNITY NUMBER			DATE OF FIRM INDEX FIRM ZON		E BASE FLOOD ELEVATION	
010116	388	G	9/29/06	AE	(In AC	Zones, Use Depth)
7000	2012		1/0/1/00	710		<u> </u>
SECT	TON II FLOODPROOFII	NG INFORM	ATION (By a Registered F	rofessional En	jineer or Architec	t)
Floodproofing Design Ele	vation Information:					
		549.8	feet NGVD. (Elevation	datum used mi	ıst be the same a	s that on the FIRM.)
<del>-</del> -						9
Height of floodproofing on the building above the lowest adjacent grade is						
receive rating credit. premium.)	If the building is floodprod	fed only to the	e Base Flood Elevation, th	en the building's	s insurance rating	will result in a higher
	SECTION III CERTI	FICATION (E	ly Registered Professiona	l Engineer or A	rchitect)	
construction are in ac The structure, to	oon development and/or r cordance with accepted s	eview of struc standards of p	ctural design, specifications practice for meeting the folionary facilities, is watertight t	lowing provision	S: ·	
All structural cor	• •	. •	ostatic and hydrodynamic	flood forces, inc	luding the effects	of buoyancy, and
I certify that the inform	•	epresents my der 18 U.S. Co	best efforts to interpret the ode, Section 1001.	data available.	l understand that	any false statement
CERTIFIER'S NAME			LICENSE NUMBER (or			<del>-</del>
TOSEPH TITLE	ABOU-JA	AOUDI	COMPANY NAME		745	
ARCITIT	ect	<u></u>	ABOU- TAC	STATE	AIRCHI ZIP CODE	TECTURE
4129 R1V	ER VIEW	COVE	BHAM A	L 352	43	······································
Joseph	Alonja	<u>oudi</u>	4-17-0	•	05-960	<del>-</del>
Coples should	be made of this Certifica	te for: 1) com	munity official, 2) Insurance	e agenvcompai	iy, and 3) bullding	owner.
FEMA Form 81-65, AUG 99		Replac	es all previous editions		,	F-056 (8/99)
All dryf	ludgrasting me	asules	have been in	nplement	d per th	re appropried
and peri	misted build	ng pki	s.	ph o	Woujas	ude 2-17-07
					V.	